CASE STUDY: Clinical Integration



Hospital Information Baptist Memorial Hospital – Memphis Memphis, Tennessee Not-for-profit hospital Annual geriatric fragility cases: 203+

TeamHealth Services Emergency Medicine Hospital Medicine Orthopedic Hospitalist

Results

30% decrease in length of stay (from 6.79 days to 4.7 days) Zero readmissions (from 8.37% to 0%)

Challenge

Nationally, clinical care providers in hospital settings are inefficiently coordinating the care for geriatric fractures, resulting in significant complication rates and high readmissions as well as an average mortality rate of more than 30% in this most fragile of patient populations.

Solution

Because Baptist Memorial Hospital – Memphis (BMHM) partners with TeamHealth for emergency medicine (EM), hospital medicine (HM) and orthopedic hospitalist (Ortho) services, they were better equipped to develop a plan to remedy this challenge. TeamHealth provides emergency medicine, hospital medicine, anesthesia, orthopedic hospitalist, OB/GYN hospitalist, and acute care surgery services to more than 990 hospitals nationwide, and as the leading provider of integrated services, TeamHealth integrates multiple clinical service lines for more than 100 clients.

TeamHealth's EM, HM, and Ortho facility medical directors teamed up with BMHM's administration to create the "Fragility Fracture Program". The Fragility Fracture Program focuses on providing a highly collaborative delivery of care for geriatric fracture patients. The new program, which began in November 2014, is a protocol-driven, evidence-based process that integrates care across all services involved in the treatment of geriatric hip fracture patients—from the emergency department to hospital medicine evaluation to surgery to postoperative care ending with discharge. The program requires active collaboration from all physicians, nurses, nutritionists, and pharmacy participating in any aspect of the patient's care.

Results

Within the first three months, length of stay decreased by more than 30 percent and readmissions were completely eliminated. The chart below illustrates additional significant metric improvements realized by the Fragility Fracture Program in comparison to non-Fragility Fracture Program patients.

Metric	Not Using Fragility Fracture Program	Using Fragility Fracture Program
Time in Emergency Department	4 hours 6 minutes	3 hours 49 minutes
Time to HM Optimization	21 hours 5 minutes	11 hours 44 minutes
Time to Operating Room	42 hours 46 minutes	30 hours 35 minutes

